



ORUM & ROTH
INTELLECTUAL PROPERTY LAW
REAL ESTATE LAW
COMMERCIAL LAW
LITIGATION

53 WEST JACKSON BOULEVARD
CHICAGO, ILLINOIS 60604-3606 U.S.A.

**DECLARATION OF INVENTORSHIP FOR
UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration
Submitted with
Initial Filing

OR

☒ Declaration
Submitted after
Initial Filing
(surcharge (37
CFR 1.16 (e))
required)

Attorney Docket Number: 13551

First Named Inventor: Kevin Conwell

Application Number: 10623393

Filing Date: 7/18/2003

Group Art Unit: 1733

Examiner Name:

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TIRE IDENTIFICATION LABEL AND TIRE LABEL FILM WITH INTEGRATED BARRIER

(Title of the Invention)

the specification of which



is attached hereto

or



was filed on 7/18/03 as United States Application Number or PCT International
(DD/MM/YYYY)

Application Number 10623393 and was amended on _____
(if applicable). (DD/MM/YYYY)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information which is material to Patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), 172, or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT or other international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT or other international application having a filing date before that of the application on which priority is claimed.

I hereby claim the benefit under 35 USC § 120 of any United States application(s) listed below. sofar as the subject matter of each of the claims of this application is not disclosed in the prior application, I acknowledge the duty to disclose to the Office information which is material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the filing date of this application.

Prior Application(s):

<u>APPLICATION NUMBER</u>	<u>FILING DATE</u> (Day/Month/Year)	<u>COUNTRY</u>
10391036	3/18/2003	USA
60379965	5/10/2002	USA
60397207	7/19/2002	USA

Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto:

DECLARATION-----Utility r Design Patent ApplicationDirect all
correspondence to:☐Customer Number
or Bar Code Label

OR

☒Correspondence
address below

Name: Orum & Roth

Address: 53 West Jackson Boulevard

City: Chicago

State: IL

Zip: 60604

Country: U.S.A.

Telephone: 312.922.6262

Fax: 312.922.7747

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:☐ A petition has been filed for this undersigned inventorGiven Name
(first and middle [if any]):.....Kevin.....Family Name
or Surname:.....Conwell.....Inventor's
Signature:.....*Kevin Conwell*

Date:.....10/30/03.....

Residence:
City:.....Fairfield.....State:.....OHIO.....Country:.....US.....Citizenship:.....US.....

Mailing Address:.....5803 N. Turtlecreek Drive.....

City:.....Fairfield.....State:.....OHIO.....Zip:.....45014.....Country:.....US.....

NAME OF SECOND INVENTOR:☐ A petition has been filed for this undersigned inventorGiven Name
(first and middle [if any]):.....Thomas.....Family Name
or Surname:.....Rogers.....Inventor's
Signature:.....

Date:.....

Residence:
City:.....Fairfield.....State:.....OHIO.....Country:.....US.....Citizenship:.....US.....

Mailing Address:.....9290 Le Saint Drive.....

City:.....Fairfield.....State:.....OHIO.....Zip:.....45014.....Country:.....US.....

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) attached hereto.

DECLARATION-----Utility or Design Patent Application

Direct all

correspondence to:

☐

Customer Number
or Bar Code Label

OR

☒

Correspondence
address below

Name: Orum & Roth

Address: 53 West Jackson Boulevard

City: Chicago

State: IL

Zip: 60604

Country: U.S.A.

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NAME OF SOLE OR FIRST INVENTOR:

☐

A petition has been filed for this undersigned inventor

Given Name

(first and middle [if any]): Kevln.....

Family Name

or Surname: Conwell.....

Inventor's

Signature: Date:

Residence:

City: Fairfield..... State: OHIO..... Country: US..... Citizenship: US.....

Mailing Address: 5803 N. Turtlecreek Drive.....

City: Fairfield..... State: OHIO..... Zip: 45014..... Country: US.....

NAME OF SECOND INVENTOR:

☐

A petition has been filed for this undersigned inventor

Given Name

(first and middle [if any]): Thomas.....

Family Name

or Surname: Rogers.....

Inventor's

Signature: *Thomas Rogers*..... Date: 11-10-03.....

Residence:

City: Fairfield..... State: OHIO..... Country: US..... Citizenship: US.....

Mailing Address: 9290 Le Saint Drive.....

City: Fairfield..... State: OHIO..... Zip: 45014..... Country: US.....

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) attached hereto.

DECLARATION**ADDITIONAL INVENTOR(s)
Supplemental Sheet
Page f****Name of Additional Joint Inventor, if any:** ☐ A petition has been filed for this undersigned inventorGiven Name
(first and middle [if any]): Karen..... Family Name
or Surname: Perry.....Inventor's
Signature: *Karen Perry* ✓ Date: *11/11/03* ✓Residence:
City: Cincinnati..... State: Ohio..... Country: US..... Citizenship: US.....

Mailing Address: 221 Feldman Avenue.....

City: Cincinnati..... State: Ohio..... Zip: 45212..... Country: US.....

Name of Additional Joint Inventor, if any: ☐ A petition has been filed for this undersigned inventorGiven Name
(first and middle [if any]): Patrick..... Family Name
or Surname: Bush.....Inventor's
Signature: Date:

Residence: City: West Bloomfield..... State: Michigan..... Country: US..... Citizenship: US.....

Mailing Address: 1612 Stauch Drive.....

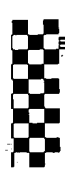
City: West Bloomfield..... State: Michigan..... Zip: Country: US.....

Name of Additional Joint Inventor, if any: ☐ A petition has been filed for this undersigned inventorGiven Name
(first and middle [if any]): Family Name
or Surname:Inventor's
Signature: Date:

Residence: City: State: Country: Citizenship:

Mailing Address:

City: State: Zip: Country:



DECLARATION

ADDITIONAL INVENTOR(s)
Supplemental Sheet
Page of

Name of Additional Joint Inventor, if any: ☐ A petition has been filed for this undersigned inventor

Given Name (first and middle (if any)): Karen
Family Name or Surname: Perry

Inventor's Signature: Date:

Residence: City: Cincinnati State: Ohio Country: US Citizenship: US

Mailing Address: 221 Feldman Avenue
City: Cincinnati State: Ohio Zip: 45212 Country: US

Name of Additional Joint Inventor, if any: ☐ A petition has been filed for this undersigned inventor

Given Name (first and middle (if any)): Patrick
Family Name or Surname: Bush

Inventor's Signature: *Patrick Bush* Date: 12-22-03

Residence: City: West Bloomfield State: Michigan Country: US Citizenship: US

Mailing Address: 1612 Staunich Drive
City: West Bloomfield State: Michigan Zip: Country: US

Name of Additional Joint Inventor, if any: ☐ A petition has been filed for this undersigned inventor

Given Name (first and middle (if any)): Family Name or Surname:

Inventor's Signature: Date:

Residence: City: State: Country: Citizenship:

Mailing Address:

City: State: Zip: Country: